

# Supplemental Type Certificate

*Number* SA7408SW

*This Certificate issued to* Heads Up Technologies, Inc.  
2033 Chennault, Suite 100  
Carrollton, TX 75006

*certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 25 of the Federal Aviation Regulations.*

*Original Product - Type Certificate Number:* A22CE  
*Make:* Cessna  
*Model:* Citation 550, 500

*Description of Type Design Change:*  
Installation of Heads Up Checklist (Electronic Verbal Checklist) in accordance with Heads Up Checklist Drawing List HU-00-100 dated 9/1/86, Revision I.1, dated 11/11/89, or later FAA approved revision.

*Limitations and Conditions:*  
Airplane Flight Manual Supplement dated January 25, 1990, or later FAA approved revision, is required. Compatibility of this modification with previously installed equipment must be determined by installer.

*This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.*

*Date of application:* July 20, 1987  
*Date of issuance:* February 02, 1988

*Date reissued:* April 3, 1990;  
August 14, 1995  
*Date amended:* 01/25/90



*By direction of the Administrator*  
*Gary Bloack*  
(Signature)  
for A. J. Merrill  
Special Certification Office  
Southwest Region  
(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

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### TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number \_\_\_\_\_

to *(Name of transferee)* \_\_\_\_\_

*(Address of transferee)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

from *(Name of grantor)* *(Print or type)* \_\_\_\_\_

*(Address of grantor)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

Extent of Authority (if licensing agreement): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Transfer: \_\_\_\_\_

Signature of grantor *(In ink)*: \_\_\_\_\_